



**GENETIC THERAPY, INC.**  
A Novartis Company

J. Timothy Meigs  
Sector Patent Counsel

Genetic Therapy, Inc.  
9 West Watkins Mill Road  
Gaithersburg, MD 20878

Tel (301) 258-4715  
Fax (301) 258-4620  
Email: tim.meigs@pharmanova.com

**Fax**

Attention Examiner Ruixiang Li, PTO Art Unit 1646

Fax no. (703) 308-4242

Number of  
pages 9

Date August 13, 2002

**FAX RECEIVED**  
**AUG 14 2002**  
**GROUP 1600**


**OFFICIAL**

RE: 09/817,487

Dear Examiner Li,

Attached hereto for filing in 09/817,487 are a Reply To Restriction/Election Requirement With Amendment including a petition for a two month extension of time and a Fee Transmittal Sheet.

Respectfully submitted,

  
J. Timothy Meigs  
Reg. No. 38,241  
Attorney for Applicant

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AUG 14 2002

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GROUP 1600

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL  
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 400.00

**Complete if Known**

Application Number	09/817,487
Filing Date	03/26/2001
First Named Inventor	Pippig
Examiner Name	Li
Group Art Unit	1646
Attorney Docket No.	4-31193A

**METHOD OF PAYMENT**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 19-0134  
 Deposit Account Name: Novartis Pharmaceutical Corp.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	740	201 370	Utility filing fee	
106	330	206 165	Design filing fee	
107	510	207 255	Plant filing fee	
108	740	208 370	Reissue filing fee	
114	160	214 80	Provisional filing fee	

SUBTOTAL (1) (\$)

**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	
Independent Claims	-3** =	X	
Multiple Dependent			

	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9	Claims in excess of 20
102	84	202 42	Independent claims in excess of 3
104	280	204 140	Multiple dependent claim, if not paid
109	84	209 42	** Reissue independent claims over original patent
110	18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65	Surcharge - late filing fee or oath	
127	50	227 25	Surcharge - late provisional filing fee or cover sheet	
139	130	139 130	Non-English specification	
147	2,520	147 2,520	For filing a request for ex parte reexamination	
112	920*	112 920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115	110	215 55	Extension for reply within first month	
116	400	216 200	Extension for reply within second month	400.00
117	920	217 460	Extension for reply within third month	
118	1,440	218 720	Extension for reply within fourth month	
128	1,960	228 980	Extension for reply within fifth month	
119	320	219 160	Notice of Appeal	
120	320	220 160	Filing a brief in support of an appeal	
121	280	221 140	Request for oral hearing	
138	1,510	138 1,510	Petition to Institute a public use proceeding	
140	110	240 55	Petition to revive - unavoidable	
141	1,280	241 640	Petition to revive - unintentional	
142	1,280	242 640	Utility issue fee (or reissue)	
143	460	243 230	Design issue fee	
144	620	244 310	Plant issue fee	
122	130	122 130	Petitions to the Commissioner	
123	50	123 50	Processing fee under 37 CFR 1.17(q)	
126	180	126 180	Submission of Information Disclosure Stmt	
581	40	581 40	Recording each patent assignment per property (times number of properties)	
146	740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279 370	Request for Continued Examination (RCE)	
169	900	169 900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 400.00

**SUBMITTED BY**

Name (Print/Type): J. Timothy Meigs  
 Signature: *J. Timothy Meigs*

Registration No. (Attorney/Agent): 38,241

**Complete (if applicable)**

Telephone: 301-258-4715

Date: 08/13/2002

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